

**FEC
FORM 3****REPORT OF RECEIPTS
AND DISBURSEMENTS**

For An Authorized Committee

RECEIVED
SECRETARY OF THE SENATE
PUBLIC RECORDS15 OCT 13 PM 2:44
Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

Chris John for US Senate

ADDRESS (number and street)

206 Mill Valley Run

Check if different
than previously
reported. (ACC)

Lafayette

LA

70508

2. FEC IDENTIFICATION NUMBER ▼

C C00394445

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS
-
- REPORT

NEW
(N)

OR

AMENDED
(A)

LA

07

4. TYPE OF REPORT (Choose One)

- (a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

- (b) 12-Day PRE-Election Report for the:



Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

in the
State of

M M / D D / Y Y Y Y

- (c) 30-Day POST-Election Report for the:



General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

M M / D D / Y Y Y Y

in the
State of

M M / D D / Y Y Y Y

5. Covering Period

M M / D D / Y Y Y Y
07 / 01 / 2015M M / D D / Y Y Y Y
07 / 01 / 2015M M / D D / Y Y Y Y
07 / 01 / 2015

through

M M / D D / Y Y Y Y
09 / 30 / 2015M M / D D / Y Y Y Y
09 / 30 / 2015M M / D D / Y Y Y Y
09 / 30 / 2015

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Joseph John

Signature of Treasurer

Joseph John

Joseph A John

Date

M M / D D / Y Y Y Y
10 / 05 / 2015M M / D D / Y Y Y Y
10 / 05 / 2015M M / D D / Y Y Y Y
10 / 05 / 2015

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

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(Revised 02/2003)